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APPLICANTS
 Eleanor L. Schuler, Rio Rancho, NM;
 Claude K. Lee, Reno, NV;
 AA

**** CONTINUING DATA *******
 This appln claims benefit of 60/249,882 11/20/2000
 AA

**** FOREIGN APPLICATIONS *******
 AA

IF REQUIRED, FOREIGN FILING LICENSE GRANTED.. SMALL ENTITY **
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature: <i>Allyn</i> Initials: <i>AA</i>	STATE OR COUNTRY NM	SHEETS DRAWING 4	TOTAL CLAIMS 15	INDEPENDENT CLAIMS 2
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ADDRESS
 Francis Law Group
 1942 Embarcadero
 Oakland, CA 94606

TITLE
 Device and method to record, store and broadcast specific brain waveforms to modulate body organ functioning

FILING FEE RECEIVED 370	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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